Appl	ication received by:		FOR TRIBAL OFFICE USE ONLY
	<u></u>		Date of application
Date	)		Interviewed
			Rejection letter
			sent
	APPLICATION FOR EMPLO	DYMENT	Position hired for
	CHIPPEWA CREE TRIBE 96 Clinic Rd N		Location of work
	Box Elder, MT 59521		HoursSalary
	(406) 395-4478/5705		Date of
			hire Supervisor
	Position applying for		
P E	Date Home Telephone	Business or Ce	ell Telephone Social Security Number
R	Last name	First	Middle
s	Street Address		
0	City	State	Zip
N			
Α	Are you available for full-time work?	[]Yes []No A	re you the legal age to work? [ ] Yes [ ] No
L	If not, what hours can you work?		
	Are you legally eligible for employme	nt in the United States	s? []Yes []No
	When will be eligible to begin work?_		

E	School	Name and Location o	f School	Course of Study	No. of years completed	Did you Graduate?	Degree or Diploma	No. of Credits
D						( ) Yes		
	Cuaduata					( ) No		
U	J Graduate							
						( ) \$7		
$\mathbf{C}$						( ) Yes		
	College					( ) No		
A						1		
						( ) Yes		
T	Trade Technical					( ) No		
I						( ) \$7		
_						( ) Yes		
0	High School					( ) No		
						-		
N		<u> </u>						
EM	DIONMENE							
	PLOYMENT							
Com	pany Name		Dates	employed (month/ day/ y	ear)	Telephone		
Addı	ress		Hours	worked per week		Number of emp you supervised	bloyees	
Nam	e of Supervisor		Exact	title of your job		Salary or earni Starting \$ Ending \$	ngs per per	
Desc	ription of work:							-
								_
			F	Reason for leaving				
We r	nay contact the ema	ployers listed above unles of want us to contact.	s you D	o Not Contact				
			Eı	mployer Number (s)		Reason_		
EMF	PLOYMENT							
Com	pany Name		Dates emp /year)	oloyed (month, day	Telephone			
Addı	ress		Hours wo	rked per week	Number of empl you supervised	loyees		

Name of S	Supervisor	Exact title of your job	Salary or earnings Starting \$ per Ending \$ per
Descriptio	on of work:		
		Reason for leaving	
EMPLO'	YMENT		
Company	Name	Dates employed (month/day/	Telephone
		year)	
Address		Hours worked per week	Number of employees You supervised
			1 ou superviseu
Name of S	Supervisor	Exact Title of your job	Salary or earnings Starting \$ per
			Ending \$ per
Descriptio	on of work:		
		Reason for leaving	
		Keason for leaving	
	ontact the employers listed less you indicate those you do not	Do Not Contact	
want us to	contact.	Employer Number(s)	Reason
	YO	OU MUST ANSWER QUESTIONS MA	ARKED IN THIS SECTION
If the emp	ployer has checked the box next to t	he question, the information requeste	ed is needed for a legally permissible reason, including, with
discrimina	ation in employment because of rac	e, color, religion, sex or national origi	n or business necessity. The Civil Rights Act of 1954 prohibits in. Federal law also prohibits discrimination based on age and
		oits some or all of the above types of o al or mental handicap or disability.	discrimination as well as some additional types such as discrimination
	Have you ever been bonded?	□ Yes □ No	☑ Are you a veteran? ☐ Yes ☐ No
			Years
			☑ Are you over 18 years of age?
			□ Yes □ No
	Have you ever been bonded?	□ Yes □ No	
	If ves what employers?		

×	Have you ever been convicted of a felony? [ ] Yes [ ] No Have you had a misdemeanor within the past year? [ ] Yes [ ] No three years [ ] Yes [ ] No Have you ever been convicted of a violent crime, example assault [ ] Yes [ ] No If yes, describe in full.
X	Do you currently have a pending lawsuit against the Chippewa Cree Tribe or any Tribal entities? [ ] Yes [ ] No If Yes, please explain.
⊠	Do you have any physical devices which prevent you from performing certain jobs? ☐ Yes ☐ No If yes, please describe limitations.
X	Do you have any physical conditions that might limit your ability to perform the job for which you are applying?  Yes No  If yes, describe this condition and how you can perform the job in spite of it.
X	Tribal Member Preference Enrolled At: Enrollment #:
application I understar in the futur If you decid	ation provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this may result in my dismissal.  id that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to continue to employ me e.  le to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is number to make the name of the agency so I may obtain from them the nature and substance of the information contained in the
Date	Signature

## The Chippewa Cree Tribe of the Rocky Boy's Reservation

## CHIPPEWA CREE TRIBE HUMAN RESOURCES DEPARTMENT

Telephone (406) 395-4478/5705 Extension 2018 (Josh) 96 Clinic Rd Box Elder, MT 59521

## **BACKGROUND INVESTIGATION RELEASE FORM**

Signature
Also Known As
Social Security Number
Previous Address
Previous Address